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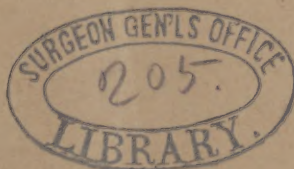
FREQUENCY, IMPORTANCE

AND TREATMENT OF

Ulcerations of the os & Cervix Uteri,

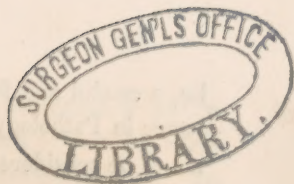
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BY D. McRUER, M. D.

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Reprint from Maine M. & S. Rept.  
Portland. 1858-9. 1, 107 etc





## AN INQUIRY

INTO THE MERITS OF THE MODERN DOCTRINES regarding the frequency Importance, Pathology and Treatment of Abrasions, Excoriations and Ulcerations of the Os and Cervix Uteri. By DANIEL McRUER, M. D., Bangor, Me.

Specifics and Specialties, although they may have, in a few individual instances, manifested a wonderful controlling influence, and simplified the labors of the practitioner, have nevertheless, in a general view, acted as barriers to the steady and regular progress of medical science : like the creeks and inlets of a noble river, diverting the waters from the regular current, and giving them for a short period new and oblique directions, only to be sent back from impenetrable boundaries to commingle again with the parent stream.

The many innovations that have been prominently brought forward by members of the regular profession of the present time, prove that the spirit that animated a Paracelsus or sustained a Brown, has not yet been exorcised ; for the same reckless dogmatism that was conspicuous in the former, or the tenacity of opinion, so ably and learnedly maintained by the latter, have their similitudes now-a-days.

The cervico-uterine pathology of Dr. Bennett, and his single, but, according to his opinion, never failing remedy—the caustic—may be justly considered as belonging to the medical aberrations alluded to ; and by their unusual pretensions, as well as by the pertinacity with which they have been forced upon the notice of the Profession, and also by the ability by which they have been maintained, they have gained a crowd of disciples, whose acquiescence in these doctrines, I fear, has been yielded to their novelty, rather than to any truths which they prove or inculcate. As Dr. Bennett's theory involves important considerations belonging to the science of the Healing Art, as well as to the moral relation which the practitioners of medicine sustain to the pub-



lic, a candid and fearless inquiry into its claims as being an advance in Pathology and an improvement in Therapeutics ought not to be considered impertinent or useless.

We are met at the very threshold of this inquiry by an obstacle, which, I apprehend, has been the principal cause of the contradictions and discrepanceies which have existed among medical writers on this subject for the past few years. This obstacle arises out of the difference of opinion regarding the true definition of "ulceration," for while the majority of medical writers still regard ulceration as a "solution of continuity," "a loss of substance," "an excavation," "a molecular gangrene, with a secretion of pus," there are a few who embrace within the term "ulceration" a number of trivial lesions, which have heretofore been considered as "abrasions" and "excoriations;" and even these so slight as not to be detected by the unassisted eye, requiring the application of the nitrate of silver to the suspected surfaces, so that by its more intense action upon the abraded parts, they may in this manner be discovered.

Dr. J. H. Bennett of London, who may be considered as the most prominent among the innovators in cervico-uterine pathology, embraces within the term "ulceration," "all the modifications which suppurating surfaces offer, from the minute granulations of a slight abrasion, to the livid vegetations of an unhealthy sore;"\* and says that these so-called ulcerations are never excavated but that their planes are always either on a level with, or above the surrounding surfaces; and that their margins are so little altered in their relation to the adjoining healthy parts that it is almost impossible to detect them by the touch.†

Dr. Bennett does not seem to be aware, that in making these declarations, he is departing from established usage; for he boldly claims Boyer, Petit and Samuel Cooper as his supporters in giving "ulceration" so extravagant a definition; but in quoting from Samuel Cooper he betrays the partial spirit of his inquiry; for in doing this he proves himself guilty of a "suppresio veri."

\*Bennett on the Uterus, p. 89.

†Bennett on the Uterus, p. 89, 90.

Dr. Bennett says Samuel Cooper defines ulceration to be "a process by which sores or ulcers are produced ;" but he holds back the important declaration which immediately follows : "an ulcer is a *chasm* formed on the surface of the body by the removal of parts back into the system by the action of the absorbents."\* The result, however, of giving such a wide range to the term "ulceration" has been to produce among medical writers on this subject, a great diversity of opinion both as relates to the frequency of occurrence, as well as to the importance of these lesions, when located upon the os or cervix uteri ; and consequently as regards the necessity of *specular* examination as well as the direct application of caustics.

In illustration of these diverse opinions, we may refer, on one side, to the declaration of Dr. Bennett, who says "that he found 222 cases, such as he terms ulceration, among 300 females, whose symptoms justified, in his opinion, the use of the speculum.†

Dr. Whitehead of Manchester, going still further in the same extreme direction, says of more than 2000 individuals laboring under leucorrhœal affections in whom I have examined the uterus with the speculum, I have, with comparatively few exceptions, found the existence of structural lesion sufficient in degree to account for all the symptomatic phenomena :‡ And yet this Physician remarks in the introduction to his work on "Abortion and Sterility ;" "But happily it is only in a small proportion of cases that the speculum is absolutely necessary, either in the investigation or the treatment of uterine diseases. In reference to the former, the remote symptoms in connection with tactile evidence are, for the most part, so prominently developed and so constantly present, as to reveal in the fullest and most satisfactory manner, not only the existence of the disease indicated, but often, also, its precise character and extent."

But the unavoidable obstructions and inconveniences attending the investigations of Dr. Whitehead, as well as the character of his patients, deduct much from the worth of his data, up

\*Sam'l Cooper's Surgical Dictionary.

†Bennett on the Uterus, p. 58.

‡Whitehead on Abortion and Sterility.



on which his whole arguments are dependent. He says in a note to the above work [page 300] ; "The Manchester Lying-in Hospital has no internal accommodation for patients. The subjects of my inquiry were scattered over an immense district measuring several miles in diameter in every direction, and inhabiting hovels as loathsome, pestilential and disgusting as may be found in any civilized community.

The Institution was an old dwelling house, situated in a confined part of the town and containing lodging rooms just sufficient for the accommodation of the house surgeon, the matron, and a maid-servant ; but not so much as a couch for the use of a patient, who might be taken ill on the premises." Under such circumstances, how could it be possible for a practitioner to nicely discriminate between specific ulcerations and those of an *accidental* character : for surely, their histories, especially as they involved the moral character of the patient, could not be depended on. However, opinions furnished from such irresponsible data, drawn from the scum of a manufacturing population of 400,000, cannot be supposed to be applicable to private practice in the United States.

Dr. West of St. Bartholomew's Hospital, London, states that he found 125 cases of *ulceration* of the cervix uteri, in 268 cases of sexual disease where the use of the speculum was considered necessary ; and after extending his investigations into 1226 female patients, and carefully conducting dissections of 62 uteri, he arrives at the important conclusion, that there is no relation as cause and effect between these so-called ulcerations and the numerous uterine maladies and constitutional disturbances imputed to them, by Dr. J. H. Bennett and his followers.

On the other side, Dr. Robert Lee of the British Lying-in Hospital, declares that he has never found a single case of benign ulceration of the os and cervix uteri, the result of inflammation, in the dead or the living subject ; and that to call erosions and abrasions *ulcerations* is an abuse of language, which is only calculated to mislead and deceive.

For the purpose of exposing the delusion which he thinks has

prevailed in regard to the frequency, importance and treatment of *these lesions* of the cervix uteri, Dr. Lee has collected 300 cases of female patients, who either had, or supposed they had, uterine disease ; and who had been examined and treated by the speculum and the caustic, some repeatedly for months at a time ; and who, with few exceptions, declared that instead of being benefited by such treatment, they had actually suffered an aggravation of the symptoms, for the cure of which they had been induced to submit themselves to be thus treated.\*

These 300 cases have been published in a work by themselves, and Dr. Lee offered to place in the hands of the President and Secretary of the Royal Medical Society, the name and residence of each case, so that the truth and accuracy of his report might be examined and verified and believing that it is important to the Medical Profession, as well as to the public, that the legitimate use and real value of the speculum should be accurately defined and made known, he has prefixed to the report of his 300 cases, the results of his own experience of the use of the speculum, during the last twenty-three years ; and when we consider the magnitude of his opportunities during that long period, as well as his acknowledged ability as a pathologist, his conclusions seem worthy of our highest consideration and implicit reliance. He remarks as follows :—“In the first great class of uterine diseases, which comprehends fibrous, fibro-cystic, glandular, and all other tumors which are not malignant, I have derived little or no aid from the speculum in their diagnosis or treatment. When fibrous and other tumors are formed under the peritoneum, or between the muscular fibres, or under the lining membrane, and distend the cavity, their existence can only be determined by a careful examination of the hypogastrium and of the interior of the pelvis through the vagina and rectum. The uterus is usually felt large, hard, irregular, and the cervix shortened. When these tumors have passed partially or completely through the os uteri, their size, density, the length and thickness of their roots, and the relations those bear to the os and cervix uteri, can only be determined by the touch. I have

\*Treatise on the Speculum, London, 1858.



never detected a small polypus within the os uteri or hanging through it, which I had failed to detect with the finger. In cases of this description, I have, however, repeatedly employed the speculum to ascertain the color of the polypus and the degree of vascularity of the investing membrane, which without ocular examination could not have been determined. The knowledge thus acquired was of no use in the treatment. In a case of fibro-cystic polypus of the uterus, which occurred at St. George's Hospital upwards of eight years ago, under the care of Mr. Cutler, the speculum was introduced and we saw clearly the small cysts under the vascular covering membrane. The speculum was withdrawn before the operation for the removal of the tumor had commenced. In the case of a small glandular polypus in a sterile married lady, which I saw with Mr. Painter, the speculum was employed and it made us acquainted with the color, and more perfectly with the nature and the diminutive size of the disease. The polypus was removed with the forceps, after the speculum had been withdrawn. Very recently I saw a sterile married lady, with Dr. Mergon, who had a small polypus hanging through the os uteri.

In that case the speculum had been employed before the patient came to London, and for that reason alone I had recourse to it. The tumor presented the appearance of a large bean, was of a bright red color, like vascular tumors of the meatus urinaris, and bled freely when touched, though the surface was not ulcerated. The length and thickness of the root, on which the speculum threw no light, had previously been ascertained by the finger.

The forceps was passed through the tube and the tumor removed ; but it is now my conviction that the peduncle would have been more effectually destroyed, had the forceps been passed up along the fore and middle fingers of the left hand in the usual manner. More recently, with Mr. Henry C. Johnson, I removed a small polypus hanging through the os uteri with the forceps, in a most satisfactory manner, without the speculum altogether. In all large uterine polypi it is obvious that the speculum can be of no use, and that it would not enable us in any



case to decide whether a tumor in the vagina was a polypus or an inverted uterus ; a small portion of the lining membrane of the uterus, in either case, being all that could possibly be presented to the eye. A case of large globular tumor in the vagina, now under the care of Mr. Cathrow, strikingly illustrates the truth of what has now been stated respecting the use of the speculum in the diagnosis of inverted uterus, and fibrous tumors.

In all the varieties of malignant disease of the uterus ; scirrhous, fungoid cancer, and corroding or phagedenic ulceration, the speculum has given me no assistance whatever in their diagnosis and treatment, either in the early or in the advanced stages. I have never in a single instance, failed to determine by the sense of touch, when cancer of the uterus had commenced ; but I have repeatedly after the most careful examination, both with and without the speculum, suspected that it would be developed, when the result proved that my fears were groundless. I am fully satisfied that the speculum does not enable us to decide earlier than the finger that cancer has commenced ; and if it did so, as some maintain, and enabled us to make applications to the os uteri, which could not be made without, not the slightest advantage would be gained in practice. When cancer of the uterus has advanced to ulceration the speculum is not only useless, but positively injurious and ought not to be used. In the year 1827, when I first became acquainted with the speculum, and saw it very frequently employed in a great public institution, a patient with ulcerated carcinoma speedily died from hemorrhage after the introduction of the bivalve speculum. In cases of ulcerated cancer of the uterus the best French writers have interdicted its use. "*L'etat de la matrice elle-meme,*" observes M. Teallier, "*interdit quelque-fois l'usage du speculum ; les ulcerations saignantes et profonde du col, son enorme developpement les fougosites que s'elevent de sa surface empechent et rendent meme inutile ce moyen l'exploration.*" M. Pauly gives the same opinion, and relates a case in which the speculum produced extensive laceration of the vagina and death in two hours.

Several cases of ulcerated carcinoma have come under my

observation, in which the speculum and ignorance of uterine pathology appeared to have led to the commission of the most grievous mistakes. In one of these, even in the last stage, the speculum and caustic had been employed almost daily for months, and hopes held out of recovery when the patient had only a very short time to live.

In another case which I saw with Mr. York, where the os and cervix uteri, and a portion of the vagina were all extensively disorganized by cancerous ulceration, the speculum and caustic were used, at first daily, and then twice a week for months, by the physician under whose care she came at last, without the slightest benefit. I have seen other cases analogous to these, and several others have been related to me which I had not seen.

From the age of maturity to the middle period of life, the uterus is rarely, seldom at least, comparatively with advanced age, affected with organic disease of any kind. Amenorrhœa, hysteria, dysmenorrhœa, menorrhagia, leucorrhœa, and various nervous affections local and constitutional, are those from which females chiefly suffer before the age of twenty-five or thirty.—An examination of the physical condition of the uterus in unmarried women either with or without the speculum, I have always refused to make, even when requested to do so, unless pain, severe and almost constant, in the region of the uterus, existed, leucorrhœa or hemorrhage, which did not yield to treatment, and where the symptoms did not make me strongly suspect the presence of some displacement or organic disease. In unmarried women, whatever their rank or condition in life may be, the integrity of their structures should not be destroyed with the speculum, nor their modesty wounded by an examination of any kind, without a necessity for such a proceeding being clearly shown. Even in married women, who are barren, or who have had children, it is unjustifiable, on the grounds of propriety and morality, to institute an examination of any sort, unless the symptoms warrant the supposition that the uterus is displaced or is in a morbid condition, the nature of which cannot be determined by the symptoms alone. Numerous cases of leucorrhœa in young unmarried females, where rational, constitutional

and local treatment is adopted, perfectly recover, where no examination is made.

In cases of obstinate leucorrhœa, I have often employed the speculum, in married women, after I had failed to detect the existence of disease by the ordinary method of examination. In some of these cases, there has been seen an unusual degree of degree of redness of the os uteri, sometimes affecting the whole, and at other times limited to the inner margin, with or without swelling. The white viscid discharge has been seen issuing from the os uteri.

I have never seen ulceration of the orifice of the uterus in such a case, and the condition of the interior of the cervix I have never been able to demonstrate, either with the bivalve or any other speculum ; nor do I believe that in the ordinary condition of the os uteri, it is possible to see the inner surface of the cervix, to any great extent, by any means. Where the orifice is unusually open, the lips may be separated sometimes to a small extent ; but never, as far as my observation goes, to show more than an extremely small part of the interior of the cervix. In some cases of chronic leucorrhœa, with redness and swelling of the os uteri, I have known the speculum and caustic employed at short intervals for many months without the slightest benefit, but the leucorrhœa has ceased as the general health has been restored by constitutional and topical treatment.

In a case of sterility with obstinate leucorrhœa, which has very recently occurred, the injection into the cavity of the uterus of a weak solution of sulphate of zinc, caused the most sudden and excruciating pain, and collapse of the nervous system, which had nearly proved fatal.

Sometimes one or both lips of the os uteri are in the condition which is usually called hypertrophy, and which has no relation to cancer.

One lip perfectly smooth, and not unusually hard or irregular, as in cancer, protrudes beyond the other to the extent of half an inch, or three quarters, or more. I have known this state mistaken for polypus, seized with the forceps, dragged down to the orifice of the vagina, and removed with the knife or scissors.



At other times, both the lips are swollen, nodulated and fissured, and the mucous membrane covering them intensely red, with an appearance of superficial excoriations or granulations, which are elevated above the surrounding surface. These apparent granulations are usually considered and treated as ulcers of the os and cervix uteri, but they do not present the appearances which ulcers present on the surface of the body, or in the mucous membranes lining the viscera, and they are not identical with the granulations which fill up healthy ulcers. They present the appearances often observed on the tonsils, and which are said to be ulcers, but which are not. This granular state of the os uteri, in which the diseased mucous membrane is raised above the level of the surrounding surface, and not depressed like ulcerations in all other parts of the body, is not dissimilar to granular disease of the mucous membrane of the eyelids, the most aggravated cases of which are well known to be produced by the use of escharotic applications. These morbid states of the os uteri most frequently indicate the existence of some disease of the nabothian glands, pinniform rugæ, lining membrane or walls of the uterus, or of the general health, which lies far beyond the reach of the speculum and the caustic.

The state of the orifice of the urethra not unfrequently indicates the existence of a disease of the prostate gland, or of the urethra itself near the bladder. Such is the case with the os uteri; its red, swollen, hypertrophied, granular state, often indicates and morbid conditions of the constitution of the glands, mucous membrane, and walls of the uterus, on the nature, diagnosis and treatment of which, little or no information is derived from the use of the speculum. In these cases, I have known leeches, scarifications, caustic, and the speculum employed upon a great scale, and sometimes I admit (if the reports of patients are always to be trusted to) with apparent temporary relief. Gently rubbing the os uteri with lunar caustic through the speculum, a few times at long intervals, has appeared to effect all the good which such local treatment can accomplish. It is impossible that any disease of the os uteri, or any other part of the body, can require twice or thrice a week for nine months, the alternate ap-

plications of leeches and caustic through the speculum, in the manner which has recently been recommended and practised ; and it is my conviction, that rational, constitutional treatment and injections, sedative and astringent, will in these morbid conditions of the os uteri succeed ultimately in producing more successful results than escharotics.

In some of these cases, instead of adopting the course which I have now recommended, for the removal of these diseased states of the uterus, potassa fusa has been applied to the os and cervix uteri ; a piece of potassa fusa has been run into the cervix and twisted about in all directions, which has produced sloughing and complete disorganization of the parts. In one case, which I saw in a young married lady, this had been done repeatedly and the patient had nearly perished from peritonitis and the sloughing which followed. I saw this lady some months after, with her general health deeply injured, the lips of the os uteri partially gone and the parts cicatrized and contracted. I sought in vain for an explanation of the grounds of such practice, and recommended greater caution in the use of potassa fusa ; but the advice was thrown away. Twice since, the same experiment has been repeated by the same individual, and with the same results. One of the most learned Fellows of this Society has communicated to me the history of a case which came under his observation, in which sloughing followed the application of potassa fusa to the os uteri. The cervix uteri presented the appearance of a hard, pale, shining cicatrix. A narrow chink only could be seen, into which a small bougie could not enter. The orifice was greatly contracted, if not absolutely closed. The eminent pathologist who has communicated to me the history of this case has justly observed "that if potassa fusa be introduced into the os and cervix uteri, and turned firmly round, or be applied severely, as has lately been recommended, there must be a partial death and destruction of the part, and a state of actual mortification or gangrene induced ; and this injury nature can only repair by sloughing, ulceration, cicatrization and contraction, if not a complete closure of the cervix uteri.

Neither in the living nor in the dead body have I ever seen ulceration of the os and cervix uteri except of a SPECIFIC character, and especially serofulous and cancerous ; but I have met with a very considerable number of cases, in which it had been affirmed by others to exist during life after deliberate and repeated examination by them with the speculum ; where I ascertained, that ulceration did not exist in the os and cervix uteri, nor disease of any kind. This mistake has happened not once, and to one individual, but in a number of cases and to several practitioners who avow that they are “in the daily and almost hourly use of the speculum.”

Two years ago, I saw a young unmarried lady suffering from hysteria. She had been examined with the speculum by a practitioner previously in attendance, and was declared to have an engorgement of the uterus and ulceration of the cervix. The speculum and the caustic, twice a week for several months, were required, it was said, to complete the cure. At the request of the ordinary medical attendant of the family, I examined the os uteri both with and without the speculum and did the same most carefully, but no trace of ulceration or disease of any kind could be detected in the parts. We recommended that the patient should leave her couch, to which she had been doomed, and by the use of valerian and other appropriate remedies, with exercise and sea-air, she speedily and most completely recovered without the speculum and caustic.

On the 3d of October, 1849, I was consulted by a lady, aged 20, who had enjoyed good health before her marriage. Soon after this, pregnancy took place ; and for ten weeks, according to her own report, she was extremely ill, had constant sickness, pain in the region of the uterus and in the legs, swimming in the head, inability to walk,—the whole nervous system was greatly disordered. Miscarriage took place in May 1848, about the tenth week, with much hemorrhage. I was requested by the patient's mother to examine the uterus, and to state whether it was in a sound or a diseased condition. I did so by the touch, and ascertained that it was small, moveable, and neither displaced nor diseased, but very tender on pressure about the cervix.



I was then requested to examine carefully with the speculum, and state whether or not ulceration existed in the mouth and neck of the womb, and whether one of the ovaria was not diseased. I did so, but could see nothing like an ulcer in these parts. I was then informed, that she had been examined by another physician with the speculum the day before, and that he had declared, in the most positive manner, that ulceration existed, which would render it necessary for the patient to remain several months in London to have caustic frequently applied. I recommended her to return home immediately, to avoid the speculum and caustic, and trust her recovery to sea-air, carriage exercise, sedatives and mild tonics. For some months the pains in the uterine region, and inability to walk continued ; but in the progress of time, all the symptoms wholly disappeared, without any other treatment being adopted ; pregnancy again took place ; she went to the full period ; was safely delivered ; suckled her child, and is now in the enjoyment of excellent health.

On the 22nd of February, 1850, at the request of Dr. Page, Physician to St. George's Hospital, I saw a married lady, aged 32, who had suffered severely from hysteria, both before and after her marriage. She was the mother of several healthy children, the youngest being two years of age. The general health was good, the catamenia were regular, there was no leucorrhœa nor sign of uterine disease. This lady was, however, made to believe by a friend, who had herself been treated with the speculum and caustic during some months, that there was something wrong about her womb, and that she must, therefore, consult the practitioner referred to in the last case. The lady did so, and was immediately informed that she was laboring under inflammation and ulceration of the cervix, and that it would be necessary to come to London for six months at least ; be confined to her couch ; and have caustic frequently applied through the speculum. I examined the os and cervix uteri of this patient, both with the finger and the eye, but I could discover no trace of inflammation, ulceration, excoriation, granulation, or disease of any kind whatever. Never in the whole course of my life had I seen and felt the os and cervix uteri in a more healthy condition.

I will not fatigue the Society by relating the histories of many additional cases, which have come under my observation, in which it had been previously affirmed, after deliberate examination with the speculum, that ulceration of the os and cervix uteri existed where there was actually no ulceration or disease of any kind.

Dr. Copland has communicated to me the following history of a remarkable case, in which the speculum was used, in my opinion, contrary to every scientific principle, and with fatal effects : ‘A lady, aged 50,’ says Dr. Copland, ‘had been several years afflicted with jaundice, and in the latter period of those years became paraplegic. The paraplegia was, to a certain extent, removed, so that she was able to drive out in her carriage. She had consulted several physicians before she came to me, and I had seen her repeatedly during the last few years. She had heard that a physician had cured the wife of a distinguished person of some very serious disease of the womb. When this was related to her, and that it was done in consequence of his employing a new method of examination, and that, by having recourse to this, he had not only cured the lady referred to, but was also better able than any other physician in London to find out the source of all diseases occurring in females, she went and consulted him, and at the same time informed him that she was under my care. This lady begged me to meet this practitioner in consultation, which I did, when he informed me what this new method of examination was. He stated, that from the previous conversation he had had with the patient, he believed that all her illness arose from disease of the uterus, and he wished to demonstrate this with the speculum. To this I answered, that there could be no disease of the uterus or its appendages, because the uterine functions had been performed regularly up to the age of 49 years, and that she had never complained of leucorrhœa, or of any uneasiness about the uterus.

However he succeeded in recommending, with the concurrence of this lady’s married sister who had accompanied her from the country, that an examination with the speculum should be made. I said it appeared to me wholly unnecessary, but I would leave the patient to her own discretion. The examination was com-

menced, and I remained sometime, but was shocked at the proceedings, for the hymen was unbroken, and the doors were all obliged to be closed to prevent the people in the house from hearing her screams and being alarmed. The examination went on, and after having stopped the greater part of an hour, during which it continued and was not completed, I left. About seven or eight days after this, I was informed that the paraplegic symptoms, which had previously been much mitigated, had become exasperated, and had extended so as to produce general palsy and ultimately delirium and coma. She died in eight days after the examination with the speculum, and I requested an examination of the body to be made. This was done in the presence of Dr. King, two surgeons from Woolwich, and myself. The operator with the speculum was also requested to attend, but he did not appear. The spine was opened, and as high as the first and second dorsal vertebra, lymph was effused between the membranes, but it was not recent and was partially converted into a gelatinous adipose substance. But above this, and up as high as the base of the brain, there were indications of recent inflammation, with a copious effusion of coagulated lymph observed. The uterus and all its appendages were perfectly healthy, the os, cervix, and every part of the uterus was in a sound state and the vagina also was perfectly healthy except at its orifice, which presented the appearances of recent violence. The hymen was completely torn.”\*

Dr. Lee next gives the particulars, in detail of 300 other cases and in conclusion, reiterates his former assertion :

“Neither in the living nor in the dead body have I ever seen a case of simple ulceration, from chronic inflammation of the os or cervix uteri, and to apply the term ulceration to states of the os uteri in which the mucous membrane is not destroyed, is an abuse of language calculated only to deceive or mislead the members of the medical profession, from whom the truth has been carefully concealed. The speculum emanated from the syphilitic wards of the hospitals of Paris and it would have been better

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\*Treatise on the Speculum, p. 6, 7, 8, 9, 10, 11, 12 ; London, 1858.



for the women of England had its use been confined to those institutions.”\*

Dr. Boyd of the Mary-le-bone Infirmary declares that he examined 708 uteri and did not find a single case of *non-specific* ulceration. He adds, “my impression is that ulceration of the neck or mouth of the womb is an exceedingly rare disease, else I must have observed it in the many hundreds of uteri which I have cut up and weighed : it could scarcely have escaped my notice.”†

Dr. Allen, more recently of the same hospital says that he has made, or been present at, the dissections of over 1000 bodies of adult females, and of these he does not believe that he ever saw more than 20 examples of ulceration of the os uteri of any kind, scrofulous or venereal, excluding cases of ulcerated cancer of the uterus which were known to exist before death.”‡

Dr. Pollock of St. George’s Hospital, London, states that 583 adult uteri of deceased females were examined during the period of ten years, by Drs. Prescott, Hewitt, Henry, Lee, Handfield, Jones and himself, and out of this number 268 cases were found affected with disease in some form or other. “The mucous membrane of the uterus, cervix and os, and the vagina, was observed to be diseased in 23 cases altogether ; of these, 14 cases only presented any appearance which could by fairness of observation or reason be considered as belonging to superficial ulceration, and all of these were complicated with more grave affections of other parts of the sexual or general system. Dr. Pollock concludes his able and lengthy statements of the pathological conditions presented by the examination of these 583 cases as follows :

“Independent of theory, and irrespective of any speculations relative to the functions of these organs, to the causes of these maladies, or to the plentiful remedies proposed or adopted in their treatment, when they are supposed to exist, these cases have been examined, recorded, collected, and are now given to the public. This method of collecting, recording, and compar-

\*Treatise on the Speculum, p. 132.

†London Lancet, October, 1850.

‡London Lancet, October, 1850.

ing cases, can only ultimately and correctly decide questions which have too often, and more frequently of late, led to unnecessary and injurious practices. If we only refer back to these cases, and take one broad view of all the disorders found affecting the uterine system, we cannot but conclude with this firm conviction ; that in almost all cases, constitutional affections may be detected, not only propagating, but maintaining, local diseases and local derangements ; and that our remedies, if their use is to be attended with success, or their administration founded upon pathological investigation, must be directed to the general system, cautiously if not sparingly, and in most cases, not at all directed to the part itself.”\*

Dr. Ashwell of St. Guy’s Hospital, London, states that “out of 1000 cases of sexual disease, I find that inflammation of the os and cervix uteri has happened only twenty times.”† He also declared before the Royal Medical Society that “the result of his observations had been decidedly opposed to the views regarding uterine pathology which had of late been so industriously propounded.

Firstly : he denied at once the accuracy of the conclusion which some had arrived at respecting the frequency of ulceration and in inflammation of the uterine neck ;” for “what can be said of the 1000 cases of actual uterine disease which had come under his observation in Guy’s Hospital ? These 1000 cases had not only been examined by himself, but had been witnessed by pupils in the constant habit of observing uterine disease. They had been observed also, without any reference whatever to deciding the question of the frequency of ulceration. And what was the result of the 1000 examinations ? Why, that inflammation of the neck of the uterus was found to exist in 23 cases only. These were cases too, not selected, occurring chiefly amongst the poor, and taken at random from the great mass of cases coming to the Hospital, and referred to him as obstetric physician. Taking this fact, with the admirable statistical records of Dr. Lee, he contended that together they formed a

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\*London Lancet, April, 1852.

†Diseases of Women, p. 305.

series of facts and conclusions decidedly opposed to the assertions lately made with respect to the frequency of inflammation of the neck of the uterus. If the crowded room in which they were assembled was polled, and the experience of those gentlemen who had treated a large number of diseases ascertained, he was certain that the result would be fatal to the statistics of those who had lately written on uterine disease. Should the contrary however be the result and those be proved to be as numerous as stated, then arguments against the use of the speculum would be at an end. The question then, as to whether it was desirable to violate all the natural feelings of modesty would be answered by the fact, that disease was *present* and therefore the use of the instrument was not only justifiable but necessary. But the statistics before us enable us to stand upon other grounds, and to declare the speculum not necessary to be employed as it now is, for the disease was not of the frequency which had been stated by the advocates of the use of the instrument. As now used, he had no hesitation in declaring his conviction that the speculum was subversive of female delicacy and female safety. He asserted that, in nine cases out of ten, in which it was now employed, its use was unjustifiable. He had devoted many years of his life to that branch of profession which has for its object the treatment of diseases of women. He had had a moderate share of practice and he could not help thinking that the use of the speculum as practised by some medical men amounted almost to a professional dishonor.”\*

Dr. Rigby, in his late work on diseases of females, [page 102] says ; “Ulceration of the os and cervix uteri when unconnected with malignant disease is a very simple affection of the mucus membrane covering those parts, and, like ulceration of the throat and tonsils, must be looked upon as a local result of constitutional derangement and treated accordingly. Its presence can, doubtless, produce much irritation and corresponding local symptoms, as has been shown to be the case with the affections I have described in the previous chapter (ulceration of the cervix uteri ;) but to assert that it is a cause of general derange-

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\*Report of Transactions of the Royal Med. and Chir. Society, May, 2858.



ment in the system, and to propound the postulate, that it is a most frequent primary cause of impaired health in women, argues either a singular ignorance of the fundamental laws of pathology or great indifference to truth in the attempt to propagate and maintain certain doctrines in justification of an improper and dishonest mode of treatment."

"The subject of the os and cervix uteri has been of late years exaggerated to a remarkable extent, both as regards its supposed frequency and its effects, and presents an instance of delusion as discreditable to the candor of a practitioner, as to the common sense of his patients. It has been asserted that nine out of ten patients owe their various symptoms to this cause ; and to support such an assertion, every variety of appearance which the os uteri presents as seen through a speculum has been pronounced "ulceration," although in reality having nothing to do with it ; and numerous cases have come under my own personal knowledge when caustic has been applied to a perfectly healthy os uteri, and the patient informed that she had "ulceration." The word ulceration has been applied of late years to every possible variety of appearance which the os uteri can present, although similar appearances in other parts would never be considered to come under this denomination."

In allusion to the opinions published by Mr. Whitehead and Dr. Bennet on the frequency of ulceration of the cervix uteri, Dr. Tyler Smith says, "practicing as a Physician—accoucheur, I must get the same class of patients as those treated by Mr. Whitehead and Dr. Bennet. I am in the habit of using the speculum in cases of obstinate leucorrhœa in married females, and I treat with a desire to observe truly and faithfully, but I do not myself find uterine ulceration, at least what seems to me to warrant this term, so frequently as Dr. Bennet, Mr. Whitehead, and some other gentlemen who have written upon the subject, in leucorrhœal cases, either purulent or mucopurulent. I find inflammation, engorgement, induration, excoriation, patches of aphthæ, epithelial abrasion, and granulation, often enough ; but very seldom what I call ulceration in non-malignant and non-syphilitic cases," and he furthermore adds that "the glandular structure

of the intra cervix uteri, from whence leucorrhœal discharges often originate, points to the influence of constitutional causes and exemplifies why this affection should be so common in women of strumous habits and leuco-phlegmatic temperaments; it vindicates the importance of *constitutional* treatment and directs attention to the *more rational* employment of topical remedies; and it is evident that the profuse application of caustics as recommended by the French school of uterine pathologists is both unnecessary and unscientific.\* He adds that the most frequent cause of the cervical lesions, considered by many of great importance, is the alkaline discharge of the intra cervical canal, irritating the *acid surface* of the os uteri, causing the rapid shedding of the epithelium; and that the local affections may be remedied again and again by local treatment but they will certainly return, unless the cervical secretion be brought back to a healthy condition by general and constitutional treatment. Dr. T. Smith considers the speculum by no means a certain aid to diagnosis but rather that it often misleads, from interfering with the normal circulation of the vagina.†

Dr. Snow Beck after a thorough investigation into the nature of abrasions and excoriations of the cervix uteri, and their comparative pathology with that of ulceration, says, that "the morbid process by which a portion of epithelium is separated from an inflamed mucous membrane, and an abrasion produced, is essentially different from that which caused a solution of continuity of the same part or an ulceration. In the former the epithelium is first raised by the effusion of a portion of serum beneath it, and afterwards separated; whilst in the latter it is a process of molecular gangrene, which induces a destruction of part of the membrane. To include these two distinct processes under one denomination appears irrational; and certainly such a method of procedure is contrary to every principle of pathology as at present established." He concludes his very able criticism on these so called "ulcerations" of the cervix uteri, as follows; "Thus whether the question be regarded in relation to the pa-

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\*Report on the pathology and treatment of Leucorrhœa of the os and cervix uteri to the Med. Soc. London.

†Lancet, vol. 11, 1850.

thological process going on in the parts, or with regard to the pathological condition of the organ which accompanies these processes, or in regard to the absolute alteration induced in the part, we arrive at the same conclusion ; that abrasions or excoriations are not forms of ulceration, and ought not to be classed with it under the same denomination.”\*

Dr. Lever in his treatise on “The Organic Diseases of the uterus” has arranged in tabular form 1388 female patients who were under his care, 905 of whom labored under functional sexual diseases, and 483 under organic sexual diseases. In the whole of these patients we found only four cases of syphilitic ulceration and three cases of what he terms “miliary disease of the os and cervix ;” while there existed 193 cases of amenorrhœa ; 145 of chlorosis ; 310 of leucorrhœa, and 125 menorrhagia ; certainly no relative proportion between these latter maladies and ulceration.

Dr. Meigs, of Philadelphia, in speaking of inflammatory appearances of the cervix uteri, says ; “It is a common opinion, and it is generally agreed to say so, that *these* are ulcers on the womb ; and there are people who never seem to fail of discovering an ulcer upon making an examination with the speculum matricis. An immense experience in a populous metropolis, an experience greatly increased by the resort of numerous invalids from the country and from the different states, enable sme with confidence to declare that an ulceration of the womb is among the rarest of disorders. I repeat the expression of my opinion, that these disorders and *framboisie* inflammations, and hypertrophies of the cervix have been misinterpreted and accounted as ulcerations, which they are not, the superficies being covered with a delicate epithelium, yet so very delicate as readily to give way and suffer abrasion under improvident, unskillful manipulation with the tube or the sponge.”†

The speculum uteri was reinstated as a means of medical diagnosis by French medical practitioners, and it was from seeing its extensive use in the syphilitic wards of the hospitals in Paris,

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\*London Medical Times, Sept. 1858.

†Treatise on acute and chronic disease of the uterus, p 55.



as well as in the police regulations of that city, that Bennet, Whitehead and other enthusiasts were induced to urge its claims upon the attention of English practitioners; but it was not long before the candid medical practitioners of France observed the great evils of its indiscriminate use and felt called upon to check by their influence the irrational furor of its too zealous advocates. Even some of the latter becoming convinced of their own imprudence, retraced their steps by adopting a less extravagant estimate of its real merits, as well as of the importance of cervico-uterine lesions, which were first brought prominently before the Medical Profession by the too zealous partizans of the instrument.

In proof of the change of opinion that has taken place among the medical faculty of France, in regard to the frequency and importance of simple lesions of the cervix uteri, as well as regards the true value of the speculum as an aid to diagnosis, and the necessity of caustics as a remedy in these affections, the following arguments and authoritative opinions are offered.

Profesor Gosselin, in his paper entitled "the symptomatic value of ulcerations of the uterine neck," after showing conclusively from arguments based on anatomical and physiological data, as well as from the experience of himself and others, that ulceration is a concomitant of some more grave affection, more especially of uterine catarrh, thus sums up; "If from the foregoing we are led to infer, that the symptomatic value of ulceration is of little consequence, it is especially the usual termination of the disease which has prepared me to arrive at a similar conclusion. For whatever the mode of treatment I have seen employed in the different hospitals where I have observed it, I have invariably been convinced that the restoration of invalids affected with chronic metritis, was, really, only when there was an entire absence of uterine catarrh, as well as ulceration. But it has often occurred to me to observe invalids among whom, the ulceration having disappeared, the previous symptoms would still continue; and I have seen practitioners so much imbued with the idea that ulceration of the neck constituted the only disease, that, no longer finding this ulceration, and giving no at-

tention to the catarrhal affection, they would persuade their patients that they were cured ; cured, in spite of the pains always existing ; in spite of the continuance of deranged menstruation ; and how often have they desired to attribute to nervousness, to hysteria and even to a disordered imagination, the symptoms which continued even after the ulceration had disappeared ; the invalid being in exactly the same state, as regards the manifestations of disease, as she was before. The observation of such facts has so well confirmed me in what I have advanced that I do not hesitate to affirm positively.

Dr. M. Mellier says ; ‘The most serious, the most decidedly incurable diseases often have for a point of departure, for a primitive cause ; a slight affection which it had been easy to cure and thus arrest the evil in its source. Thus leucorrhœa, which is only a symptom of different affections, becomes often in its turn, the cause of the most grave diseases. This discharge, or to be more exact, this catarrhal or phlegmatic condition of the mucous membrane which produces it, opens the way for a great number of diseases of the womb ; precedes them, and very certainly engenders them in prolonging itself : whence, we conclude that it is often to this condition that we must address ourselves at first in order to have a reason for certain ulcerations of the cervix uteri ; Doct. Duparque expresses the same idea : ‘What is the necessity of repeating that it will be vain to seek to cure ulcers by topical means alone, if one has not previously removed the vicious uterine disposition ? The general treatment proper to the case is sufficient ordinarily to induce a disappearance of the ulceration which is only symptomatic.’

The natural consequence which flows from these considerations is, that, in order to secure the recovery of similar cases, we ought to treat particularly the original malady, the uterine catarrh. Many practitioners have recourse, even to this day, to the almost exclusive employment of cauterization ; but I have seen this remedy used a great number of times, and I cannot believe in its efficacy. The patients I have seen treated without it, have recovered quite as soon, and even sooner. I have observed some, among whom canterization has been employed

many times without success, rapidly recover as soon as they have given up its use.

“Again, what is the symptomatic value of ulceration of the neck of the womb? As to the cases of ulceration not syphilitic, the answer is positive. It amounts to almost nothing. The presence of ulceration indicates, if you please, chronic metritis, with all its elements; but it does not give place to special disorders; *it does not merit the name of disease in many cases*, and it is doubtful if the art of healing has need of interesting itself with it. [Elle ne merite pas le nom de maladie dans les plupart des cas, et c’est a peine si la therapeutique a besoin de s’en occuper.”]\*

M. Robert, member of the Faculty of Medicine of Paris, gives the following recital of the history of the heroic treatment of diseases of the cervix uteri. “It was nearly twenty-five years ago, when Recamier re-introduced into practice the use of the speculum, that the attention of observers was naturally drawn to diseases of the neck of the uterus, the study of which was enriched by a precious means of diagnosis. We perceived that this organ was frequently the seat of ulcerations of various form and extent. Some, very superficial, seemed to result from a simple erosion of the mucous membrane; others were covered with very little pimples, conical granulated ulcerations. These diseases occasioned no pain, and caused no trouble to the health of the patient. They were accompanied with only a slight leucorrhœa. But we found others with which we were very eminently preoccupied. These were in general larger, their surface was red, covered with pimples, analagous to those in an old suppurating wound; and these pimples sometimes very prominent, very voluminous, bleeding at the least contact, secreted a thick yellowish matter similar to muco-pus, the uterine neck was larger than in the normal state; and to the touch it was very hard, and more or less sensible. The general health was changed. The invalids experienced pains in the lumbar and sacrococcygeal regions; a sensation of weight, of distress in the cavity: the menses were more frequent, more abundant than usual,

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\*Archives Generales de Medicine.



and there was almost always an obstinate constipation. We regarded these ulcers as cancers, or, as being able to become so, and thenceforth surgery was aroused with all its resources, and treatment the most active, the most violent was extolled. Cauterizations with the proto-nit. acid of mercury, were advised by M. Recamier ; but these means appeared too gentle, not sufficiently destructive. Duypuytren used oftentimes a great pencil of caustic potassa, which he allowed to remain sometime against the surface of the neck ; and I have intended many times to complain that therapeutics did not possess a caustic sufficiently powerful to attack and promptly disorganize all diseased tissues ; the chlorate of zinc was not then known. Cauterization not sufficing, we employed excision, and the most part of the necks, thus ulcerated, were pitilessly mutilated, [furent mutilés impitoyablement.] A salutary re-action, however, manifested itself ; facts, better studied, led practitioners to ideas more healthy. A physician deceased very young, Samuel Luer, demonstrated among the first, in 1828, that ulcerations could be cured without having recourse to cauterization and excision. Professors Margolin and Dubois, and Dr. Capuron, adopted these ideas in their practice and propagated them in their instructions. Little by little, surgery found itself disarmed. We then advised as a remedy in these ulcerations, rest in a horizontal position, emollient injections ; slight venesections ; after the epoch of the menses, application of leeches on the neck ; general baths ; some *rare* cauterizations in order to terminate or hasten the cure, in a word, all that which constitutes an antiphlogistic and resolving treatment. Under the influence of these means, ulcerations became cicatrized, and engorgements of the uterine neck were dissipated. [Sous l'influence de *ces moyens* les ulcerations se cicatrisaient et le engorgement du col uterin se dissipait.\*"]

Dr. Pichard in his work on the "Abuse of Cauterization," has collected together a multitude of facts to show that as a remedy caustics are not only entirely unnecessary ; but that they have been productive of direful results to individuals who have submit-

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\*Des affections cancéreuses et des opérations qu'elles necessitent. Alp. Rob 1841.

ted themselves to their application, even when in the hands of practitioners eminent in the profession of medicine. In the course of his researches into the merits of the caustic mode of treating ulcerations of the cervix uteri, he collected with great labor and care the results of 698 post mortem examinations of as many uteri, belonging to females who died with, or from sexual disease. Among the whole number he found 84 cases of ulceration situated as follows :

ULCERATIONS, (erosions.)		ULCERS.	
Of the vagina :	12.	Of the vagina communicating with the bladder and rectum :	15.
Of the vagina and neck of the uterus at the same time :	6.	Of the vagina and neck :	12.
Of the neck :	11.	Of the cavity of the body :	2.
Of cavity of the body :	4.		
Ulcerations having their seat in the ovaries :	3.		

Dr. Pichard sums up the results of his observations as follows: of all the means employed against ulcerations, erosions and ulcers of the womb, cauterization is one of the least rational, that is, one of those which are found the least in connection with the peculiar organization of the cervix uteri, or with the nature of the local or general causes, under the influence of which these affections supervene.

That which reason discovers in this matter, experience confirms ; for if on the one hand it is possible to demonstrate that the greatest number of cures attributed to the use of caustics are not imputable to them, since cases exactly similar are daily cured without the employment of cauterization : on the other hand, also, it must be admitted that cases which, treated by caustics, have had a fatal termination, must indeed be attributed to them, since invalids placed in identical circumstances, and even more unfavorable, have been cured by the *ordinary* means.”\*

In the reports of the meetings of the academy of medicine in L'Union Medicale for 1855, will be found the following authoritative opinions regarding ulceration of the cervix uteri, and their influence on conception and gestation. Carzeau declares that ulcerations of the neck of the gravid uterus are rare, but when

\*Des abus de la cauterization et de la Resection du col dans les maladies de la matrice. F. L. Pichard.

they do exist, they ought not to be subjected to active treatment, as he considers them of very little importance.

Danyau relates, that, at the Hospital de Maternite, he had twenty-two pregnant cases. Eight presented erosions of the neck of the womb, in a fungous condition; six, simple erosion; and eight, free from disease; yet they all, alike, went their full time.

Gosselin states, that he does not believe that these erosions have any bad effect whatever upon the progress of gestation.

Cloquet says, that ulcerations of the cervix uteri are not frequent in the latter months of pregnancy. He does not consider them of much importance, or requiring any treatment; should they become hemorrhagic, he recommends mild astringent washes, otherwise they had better not be interfered with, as they disappear after confinement. Gerdy declares that he has often seen erosions on the cervix uteri of pregnant women, and has learned from experience not to consider them of sufficient importance to require active treatment: they disappear after confinement.

Hugier states that erosions of the neck of the womb are frequently met with in pregnancy, but that ulcerations are rare; that neither are important; requiring no treatment, except rest, and mild, astringent washes.

Bichet relates that during three years' practice in the Hospital Le'Ourcine, he has only seen six cases of ulceration of the cervix in pregnant women; five of these were syphilitic previously; four aborted: the benign case and one of the others passed safely through the process of gestation.

M. Baud says, that the ulcerations and engorgements of the cervix uteri are, for the most part, due to a disordered state of the general system, and that all treatment, that has not the improvement of the general health for its principal intention, is useless.

Lisfranc states, in the third volume of his *Clinique Chirurgicale*, that simple ulcerations of the cervix uteri can be cured without the aid of caustics; and in his work on the uterus, he assures the reader that some of the worst cases of ulceration of the cer-



vix uteri that he ever met with, were at last cured by washes of decoctions of Peruvian Bark, after resisting the effect of cauterization as well as of other remedies. [Page 136.]

Dr. Dubois in the debate of the French Academy of Medicine, in the winter of 1849-50, contended in a lengthy and able argument, on that occasion, that abrasions and excoriations were phenomena consecutive upon prior diseased conditions, and that in regard to their symptomatology and treatment, they were of secondary importance.\*

M. Gibert in the *Gazette Medicale* of 1849, declares that from a large hospital experience, he is confirmed in the belief that the alteration of color, size, form and texture of the cervix uteri, which are considered by Lisfranc and his followers, as the indications of ulceration have no relation whatever to any such lesion.

Dr. Chomel in the *Gazette des Hospitales*, No. 19, states that the term ulceration is unadvisedly used for abrasions or granulations, and that during twenty years' practice in the Hospitals of Paris, he has met with only two cases of non-syphilitic ulceration of the cervix uteri.

Valleix, in his work on Practical Medicine, declares, that erosions and excoriations ought not to be confounded with ulcerations, and that while the former are of frequent occurrence, the latter are very rare. He consequently gives them a separate place in his most excellent and acknowledged standard book. And yet Dr. Henry Bennet, fresh from the Hospitals of Paris, writes thus:—"I may now, however, add, that all who have written in France on the subject of uterine inflammation, have applied the word ulceration to the lesions to which I apply it. Some have called abrasions and excoriations, exulcerations or granular ulcerations; which I have not thought proper to do; but this is the only difference between them and me."†

In regard to the influence of ulceration of the cervix uteri, as a cause of sterility, I will adduce the valued researches of Carl Meyer, a celebrated German Pathologist, who spent many years

\**Gazette Medicale*, 1850.

†*London Lancet*, Sept. 1850.

in the investigation of the causes of sterility, during which time he examined the bodies of 272 sterile married women. The slightest abnormal appearances on the ovaries, uterus and appendages, as well as the vagina, were carefully noted and arranged in tabular form; and among the whole number of cases not one example of ulceration of cervix uteri was found. This authority I hold to be so conclusive in regard to lesions of the neck of the womb, being not a cause of sterility, that I cannot refrain from giving a synopsis of his statistics, merely remarking for explanation, that each case is repeated sometimes, as it exhibits one or more different lesions.

In 2; No Uterus.	In 31; Chronic Endometritis.
" 60; Antelexions.	" 25; Chronic Oophoritis.
" 37; Retroflexions.	" 23; Ovarian tumors.
" 35; Anteversions.	" 12; Uterine polypi.
" 3; Retroversions.	" 6; Fibroid tumors of the uterus.
" 42; Inflammatory irritations of the outer genitals.	" 1; Elephantiasis of outer genitals.
	" 6; No pathological condition of the genitals was found.

16 of the antelexions had one irritation of pudenda; 4, endometritis chronica; 5, oophoritis chronica; 3, ovarian tumors; 1, polypus; 2, hypertrophy of uterus. 13 of the retroflexions had one irritation of pudenda; 6, endometritis chronica; 2, oophoritis chronica; 2, ovarian tumors; 1, fibroid tumors; 1, elephantiasis of pudenda. 10 of the anteversions had 2 irritations of pudenda; 3, endometritis; 2, ovarian tumor; 1, polypus uteri; 2, hypertrophy of uterus.

In one case of retroversion there was chronic oophoritis."\*

It has been contended by some of the advocates of Bennet's theory that the discrepancy observed among medical writers on the subject of ulceration of the cervix uteri, is more apparent than real; that it has arisen entirely from the different construction which each party gives to the name of "ulceration," and at most is but an abuse of terms. But an abuse of terms, when applied to the nomenclature of disease, is nothing more nor less than an abuse of things; for we attach to certain names of diseases certain pathological ideas, as well as certain therapeutical indications which are difficult to disassociate. The Hippocratic

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\*British and Foreign Medical Review, Apr. 1857.

axiom, *naturam morborum ostendit curatio*, is not more true than its converse ; and it is particularly applicable to the popular mind. An ulcer is, with them, a foul sore, and a foul sore is generally, in their estimation, akin to cancer ; and when a woman is told that she has an ulcer of the womb, the transition in her mind from ulcer to cancer is almost an instinctive process ; and there is no sacrifice but that she will readily make, no suffering she will not willingly undergo, to be rid of her dreadful, but yet imaginary evil ; all arising from the misapplication of terms. In this manner a wide door is thrown open for the ignorant and mercenary to impose upon the public and degrade the Profession. "A good many practitioners" says Pichard in his treatise on Cauterization, "left to their own determination would abstain from resorting to cauterization if they did not see themselves, so to speak, obliged to do so by their patients, who, frightened at the term "cancer" which has been made for some years to ring so often in their ears, believe themselves menaced by the slightest inconvenience which they experience in the region of the uterus, and imagine that the Healing Art has no other resources to oppose against this cruel disease than cauterization or the knife. Can one have a thought so inconsiderate as to suppose that there are physicians whom even the desire of not contradicting their patients can prevail upon them to believe in the existence of affections which they have not ; managing thus ; by an assurance of a cure, beforehand, and thereby claiming credit which does not of right belong to them ? We will not answer this question ; but, that which we are able to affirm, is, that the opportunity of acting thus presents itself often enough to practitioners who make a specialty of the diseases of women : " [ "*que l'occasion d'en agir ainsi se presente encore assez souvent aux praticiens qui s'occupent specialement des maladies des femmes.*" ]

A German physician, Atterbury, has written a series of letters on the diseases of the womb, in which he notices the same evils arising from alarming and pseudonymous titles, acting on the imaginary fears of patients. "Ulceration (elkose) presents itself under the unimportant form of erosion, which attacks only



the epithelium, while a cancer, as we shall see, manifests itself more seriously by entering deeper into the substance. Such are all those forms which authors have designated under the names of simple or benign ulcers ; and others again, without their natures being examined into, have been designated more vaguely. It is true that nature does not always respect our classifications, but it is not less true that *a false classification of diseases will introduce a false application of remedies.*

The constitutional symptoms attending this affection (elkose) are not of great importance ; the general health is very little deranged. Only sensitive subjects complain of pain in neighboring parts. Many females would not experience more trouble from these affections of the neck of the womb than from similar affections in some other passage of the body, for example at the angles of the mouth, if the fear of uterine affections was not so great. The imagination is always sufficiently active among women to excite the idea of the existence of a serious disease of the womb.”†

The Profession of Medicine has suffered much already from the too great officiousness of many practitioners with the recuperative powers of nature in disease, and especially in the injudicious management of heroic remedies ; consequently, a large number of the community have gone over to the other extreme of non-interference under the guise of Homœopathy, and self-interest as well as professional reputation ought to induce us to be careful not to increase the defection by unnecessarily interfering with rights and feelings which have always been heretofore considered as sacredly belonging to the marital relationship. However, there are other causes, less censurable than those just alluded to why there may be differences of opinion among the most honest and well intentioned observers regarding the frequency of lesions of the cervix uteri ; and these grounds of difference arise from the difficulties attending the diagnosis of diseases of that organ ; and it is somewhat remarkable that these obstacles to a true determination of the disease, all tend to give the ob-

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†Otterberg, Lettres sur les ulceration de le matrice et leur traitement.

server the impression that disease is present, oftentimes when none exists.

In the first place there is no standard for the size or shape of the os and cervix uteri. They differ in different women and in the same woman at different times, and when an individual, who may have an ideal standard of his own in regard to their shape or size, finds that it is not met by a correspondence in the cervix uteri, that he may be examining, he will be led hastily and erroneously to suppose that an abnormal state exists when it does not.

The speculum uteri, however much it may aid at times the examination of the deep parts within the vagina, cannot be kept within that passage for any length of time without obstructing in some degree the circulation of the vaginal walls; and as they receive a portion of their vascular supply from the same source which sustains the cervix uteri (the uterine arteries,) a compression of those arteries belonging to the vagina will produce a corresponding congestion of those belonging to the cervix, and, in consequence of this, present to the eye of the observer a denser color and sometimes a varicose condition of its vessels; especially if the examination be made during the *molimen hemorrhagicum*, or immediately after the patient has been exposed to hypostatic causes of congestion, in this manner deceiving the practitioner into the belief that permanent disease exists, when all the abnormal appearances are only the transient results of temporary causes.

Should the patient be examined immediately before, or after the menstrual period, or after the parts have been subjected to some fugitive cause of irritation, the mucous papillæ being in a state of congestion and prominence, will present to the speculizer the appearance of granular inflammation; and should any obstructed follicles exist, with their contents shining through the thin pellicle of epithelium that covers them, they will give the impression of aphthous ulceration, and thereby lead the medical observer into error respecting the real condition of the parts examined.

The secretions are another great source of mistakes. It has been often demonstrated, from the time of Sharp and Hunter, that mucous surfaces, from slight irritations, throw off a modified secretion, so much so, as to amount to a purulent fluid, without leaving the slightest lesion behind.

The mucous membrane of the vagina and os, undoubtedly possesses this *physio-pathological* peculiarity, and consequently we find these parts bathed with a purulent secretion without the least breach of surface ; yet, it is difficult to observe a purulent discharge without associating it with some ulcerative lesion : more especially is this the case when we observe the mixture of the alkaline inter-cervical secretion, with the acid product of the vagina, producing by their union a fluid which cannot easily be distinguished from genuine pus, when placed side by side with each other. From my own limited experience, I am confident that these peculiarities attendant upon the diagnosis of uterine disease are oftentimes sources of error, which the speculum cannot remove even when used by the most able and experienced practitioners. The celebrated Prof. Roux, of Paris, confessed before the Academy of Medicine, in the winter of 1849-50, that he had been so misled by the speculum, that he actually extirpated a healthy cervix uteri, believing it from specular examination, to be cancerous ; but to his horror, after its removal, he found it to be free from any such disease ; and it was with bitter regret that he felt that, by this mistake, his patient was sacrificed.

Velpeau, who may now be considered as the *Nestor* of French surgery, makes the following avowal, in "La France Medicale" of the 13th February, of the present year ; and, when we consider that he was one of the earliest and strongest advocates of the speculum, the value of his opinion will be greatly enhanced. "Professional men generally overrate the diagnostic powers of the speculum, for in nine cases in ten we may very well dispense with it. *Both experience and reason tend to render the use of the speculum less frequent.* This instrument, in fact, teaches us nothing respecting the volume, shape, position or density of the organ to be examined. The only circumstance which it brings to light is the tint of the cervix, and the knowledge of this tint is often of no use whatever. The finger is far more useful ; with



it we make out ulcerations, granulations, fungosities, and the consistence of the cervix. Nay, the speculum often leads into errors of diagnosis, and makes us suspect lesions which have no existence. The neck of the uterus, caught by the extremity of the speculum, appears larger than it really is, and the os looks gaping; nor should it remain unmentioned that a simple fold of the vagina is often mistaken for the cervix, and the caustic is applied where it was not intended to act."

The foregoing accumulation of medical testimony in favor of the non-importance of the so-called ulcerations of the cervix uteri, as a disease *per se*, may be corroborated by inferences fairly drawn from data furnished by what is well known of the peculiarities of the anatomy, physiology and pathology of the parts concerned.

We usually estimate the importance of the pathological condition of an organ by the relation which the organ holds to the general systems of anatomy and physiology. This is so universally acknowledged to be true, that Rokitsanski has laid it down as an axiom in his work on "Pathological Anatomy," vol. i. p. 23, in the following words; "The importance of a disease bears a direct ratio to the worth of the organs attacked." To this test let us bring these *lesions* of the cervix uteri, and then judge of their importance as a disease. What are the relations of the cervix uteri to the anatomy of the womb, and what is its worth to the functions of generation?

Dr. Bennet states at p. 45 of his work on the uterus; "In the non-pregnant state, the cervix is more freely supplied with blood vessels than the body of the organ, which may account for its greater liability to inflammatory disease." In making this statement, Dr. Bennet has certainly allowed himself to fall into an error. There are but few standard authorities in anatomy, who make the comparison between the vascular supply of the body and neck of the womb; but yet there are some who do. Among the latter I will mention Todd and Bowman, who wrote their work on the Anatomy and Physiology of Man, without any reference whatever to this controversy, and who distinctly state [page 844,] that; "The mucous membrane of the uterus forms a pale and not very thick lining membrane. In the

fundus and body of the organ it is of a *redder color* than in the cervix, in consequence of *the greater vascularity of these parts.*" When we consider that all the blood that is carried by the spermatic arteries, supplies the body of the uterus, as well as the ovaries; that at least, one-half of what is supplied by the uterine arteries goes to the body of the womb, while the other is distributed to the vagina and cervix; we must be convinced that the uterus, in the unimpregnated state receives a much larger supply, in proportion to its size than the cervix. We are led to this conclusion likewise by physiological considerations. It is from the body of the womb that blood is received to supply the menstrual flux: it is from the body of the womb that the blood for the growth of the fœtus and its appendages is received; and it is the body of the womb which undergoes that remarkable increase of volume and weight which has been a wonder and a mystery to the ablest physiologists.

Dr. Bennet likewise remarks that the cervix uteri possesses a "high vitalization," and therefore is very subject to disease. It is difficult to comprehend how an organ can be highly endowed with vitality, unless it is well furnished with nerves, as well as blood vessels; and it is well known that it is yet a mooted question whether the cervix uteri has any nerves in its organization. Osiander, of Gottingen, says that he has not been able in all his dissections, to find any nerves in the neck of the womb; and M. Jobert, of Paris, states positively that the cervix uteri has no nerves. These statements may be sustained, reasoning theoretically from the fact that the cervix is, in health, very insensible; that it may be roughly handled and probed without occasioning any serious pain or distress. It is true that Drs. Lee and Beck of London, have both satisfied themselves by dissections, that the uterus is well supplied with nerves, both cerebro-spinal and ganglionic; but the correctness of their demonstrations has been doubted by some of the ablest anatomists of Europe. Yet, admitting that the dissections of these gentlemen are correct, if we examine their plates, or read carefully their descriptions, it will be found that but few of the nerves, there illustrated or described, *terminate* in the cervix. Dr. Bennet admits this; for, in p. 46, he says; "The marked insensibility of the vaginal

portion of the cervix, in the great majority of cases, would tend *a priori*, to prove that nerves are deficient in this region, or which is more probable, present to a very limited extent. In no other region of the uterus do we see the same absence of pain, when serious disease is present, or when powerful therapeutic agents are resorted to." Now what are the physiological relations of the cervix uteri? Does it take any active part in that pro-embryal function of pregnancy, menstruation? No: it only acts as a conduit to the excreted fluid. Does it facilitate in any degree the act of conception? No: none that we know of. We can conceive why it may many times act as an obstacle, but never as an assistant. Does it do anything to sustain foetal or maternal life during the long period of gestation? No: it merely holds a plug which is of very questionable utility. Does it facilitate in any manner the painful process of parturition? No: on the contrary it is well known to act as an obstacle to the accomplishment of labor; and it is a fact, equally well ascertained, that its walls may be so stretched as to increase its calibre from the size of a crow quill to that of seven or eight inches diameter, with impunity. It may be torn; it may be incised; it may be cauterized; it may be burnt; yes, it may be extirpated; without disturbing in any great degree the functions of menstruation, conception, gestation or parturition. Proof of this assertion may be found in the writings of Recamier, Dupuytren, Lisfranc and Velpeau. Lisfranc, in his work on the uterus, gives ten cases of women who, within a short time subsequent to having undergone the operation of excision of the cervix uteri, conceived, and all of them went through their full period of gestation and were safely delivered of healthy children, without accident; except one woman who aborted in the third month, from causes which, Lisfranc says, would have produced abortion under the most favorable circumstances. Prof. Simpson, of Edinburg, relates a case in his papers, which have been published in this country, of a woman in the town of Leith, Scotland, from whom he extirpated the whole of the surgical neck of the uterus, and who must have conceived in ten days from the date of the operation, (May 25, 1840,) and she passed through the period of gestation, and was safely confined on the 14th of February, 1841.



She subsequently menstruated regularly, and at the time the account was written, (Aug. 10, 1846,) she had two other children, the youngest of whom she was still nursing, and at that time, says Dr. Simpson; "she declared to me that she never enjoyed, in all respects, better health than at present."

It is difficult to comprehend it to be possible, that an abrasion or an excoriation, and even this so slight as not to be readily discovered by the eye, or so little altered from the healthy parts as not to be detected by the most delicate touch, can produce, when situated upon so unimportant a surface as that of the cervix uteri, such serious consequences as are portrayed by Bennet and his followers; for the cervix uteri itself is but a peripheral appendage of an organ that holds only the second place in the function of generation; and its diseases are seldom anything more than "fragments of constitutional maladies."

But although Dr. Bennett, by his work on the uterus, first betrayed the English reader into an extravagant opinion regarding the merits of the speculum as an aid to diagnosis, or the value of caustics as an addition to the therapeutics of ulceration of the cervix uteri, still, Dr. Bennet never intended that either the speculum or the caustic should be so indiscriminately used as they are at the present day by some practitioners. This conclusion is arrived at from calculations based on the declarations of Dr. Bennet himself. In the London Lancet of April 1851, will be found a report of a debate originating from a paper read by Dr. Greenhalgh before the Medical Society of London, in which he implied that Dr. Bennett had encouraged the too frequent use of the speculum. Dr. Bennett, to clear himself from such an accusation, stated that in the Western Dispensary where he officially attends, from 4,000 to 5,000 females presented themselves annually for medical treatment; and out of that number only 120 were considered to be fit subjects for specular examination. Now if we allow that one woman in ten applies annually for medical relief, which is certainly a large calculation, it will make a community of 45,000 (taking 45,000 as a medium,) from which these 4,500 women came; but these constitute only one-half the adult population, for the males amount to as many more, making an adult community of 90,000; then we

must add at least one-fifth for children under thirteen years of age ; for it would have been deception for Dr. Bennet to have included these, in the number given, as subjects coming within the limits of specular examination ; this would give 18,000, which, added to the adult population would give a community of 108,000. Now we must reduce the 120 cases, belonging to this population, which were thought to be fit subjects for specular examination, in the same ratio as he reduces his 300 to 222 cases of ulceration, in his book on the uterus, page 58 ; and this will give, for the 120 suspected invalids, 88 cases of ulceration of the cervix uteri. Now these 88 cases from 108,000 would not give to each physician in the United States a case of ulceration of cervix uteri in two years, or, to the regular practitioners of medicine in any of our most populous cities, a single *private* patient with that disease annually. And yet there are practitioners who have been known to boast of having 40 patients, in their private practice, laboring under ulceration of the cervix uteri, at a time. Certainly the pupils have outrun their master ; and if "distance lends enchantment to the view," it likewise may be said to give exaggeration to the mind.

Notwithstanding the contradictory views which have prevailed in regard to the true nature of ulcerations as well as their treatment ; still, a calm and unprejudiced observer may, from the conflicting testimony advanced, be able to glean many important pathological hints and valuable therapeutical indications. For instance ; we consider ourselves warranted in inferring, from even Dr. Bennet's admissions, the two following important particulars in opposition to his theory : namely, the trivial character of his so called, ulcerations, and their dependance upon constitutional and other maladies ; for, in the first place, Dr. Bennet says at page 102, that ; " Extensive inflammation and ulceration of the cervix uteri may exist for years without giving rise to pain or any well marked local symptoms." And again he says, at page 123 ; " There is no traceable connection between the extent of the local disease and the amount of the constitutional and local suffering. The most trifling lesion may occasion extreme disturbance, while, in other cases, extensive disease will

scarcely give any evidence of its presence." Again, at page 90, he declares that "Whatever the character of the inflammatory ulceration of the cervix, the ulcerated surface is *never* excavated; it is *always* on a level with, or above, the non-ulcerated tissues that limit it." But is this really the case? Do the structures of the cervix uteri possess, through some peculiarity, an immunity from the usual ravages of ulceration; or does its location preclude its liability to the general effects of this pathological process? Certainly not: for it is well known that a destructive "corroding ulcer" oftentimes not only makes excavations on the cervix but entirely destroys it, and extends to the surrounding tissues. Chanceroous ulcers, when they first appear on the cervix, present the same characteristics "and complications, which may exist in man, whether they be situated on the vulva, urethra, vagina or uterus." (Ricord.) And, in cases of procidentia, it is not uncommon to see the os and cervix honey-combed, as it were, with deep, ragged ulcerations; and it may be remarked here that all authorities who have written on this displacement admit that when the parts are returned to, and kept in, their natural position, and the patients observe a recumbent posture, with the occasional use of mild astringent washes, these, really true, *local* ulcers usually become soon cicatrized, and regain a perfectly healthy condition, without resorting either to the speculum or the caustic. Furthermore, it may be added, that the wood-cut in Dr. Bennet's work on the uterus, intended to illustrate inflammation and ulceration of the os and cervix, was taken from a morbid preparation, which belonged to a young lady who died from a chest affection, and who was previously in good health; no one suspecting that she had any uterine disease whatever.

From these facts and considerations we cannot refrain from believing that an affection which exists under every kind of symptom, some of them contradictory to the symptoms which usually attend upon ulceration on other parts, and even on the same parts, and at times giving rise to no symptoms whatever, must be rather a concomitant of various primary affections than a disease *per se*; and that it does not constitute a morbid center



from which irritations radiate to disturb and affect distant organs. Indeed, Dr. Bennet, notwithstanding his great desire to sustain his peculiar doctrine, that ulceration of the cervix uteri is a local disease giving rise to various constitutional affections, and which disappear only with the local lesion which he maintains is the primary disease ; yet, cannot help strongly implying that the reverse is the true doctrine. At page 13 of his "Review of Uterine Pathology" he says, "I admit, to the fullest extent, that the nutrition, vitality and function of the uterus are susceptible of being modified by general causes or by general morbid conditions, without the existence of any description of local mischief, inflammatory or other, of the uterus or ovaries ;" and, at page 18, he says : "*No class of maladies more happily illustrates how artificial is the barrier between Medicine and Surgery than uterine diseases, as illumined by modern research. In their early stage, and in their simple forms, they are medical, and fall, all but necessarily, under the eye of the physician ; but in their latter stage and in their more aggravated form they are essentially surgical.*"

Stronger arguments could not be found, than the foregoing, in support of what we consider to be the true character of these lesions of the cervix uteri :—That is, that, from constitutional disturbance, the secretion from the mucous membrane of the uterus and especially from the glandular portion of the neck, becomes vitiated in character, and, by its ichorous properties, irritates the surfaces with which it comes in contact, producing those excoriations which are oftentimes attendant upon similar affections in other parts of the body ; on the cheek from epiphora ; on the nares and upper lip from coryza ; on the glans penis from blenorrhagia ; and on the rectum of children from mucous diarrhoea.

In regard to the therapeutics laid down by both parties in this controversy, as the most judicious in cases of chronic leucorrhœa, attended, or not attended, by local lesions of the cervix, there is no great difference of opinion, except so far as a resort to *destructive* cauterization is concerned, and the necessary and repeated introduction of the speculum ; for it is agreed by all parties that absolute rest of the parts concerned is essen-

tial to their return to a normal state ; consequently, all mechanical irritations arising from sexual congress, or sudden, violent or prolonged movements of the body, ought to be avoided. It is neglect of this single requirement, that, more than anything else, has prevented recoveries in the early stages of leucorrhœa, before any local abrasion whatever had manifested itself. Cleanliness of the vaginal passage, maintained by emolient and cooling washes, giving them an astringency as the profuseness or liquid character of the discharges seems to require, is another of the means which are recognized by the experience of all practitioners as requisite in the successful treatment of these affections. Attention to the general health is another important *sine qua non* in the treatment of lesions or morbid secretions of the os and cervix uteri or even the vaginal passage. All causes tending to divert or confine the circulation to the pelvic viscera ought to be avoided and removed ; such as long continued standing or sitting, as such positions favor gravitative congestions in the parts concerned, and consequently the vessels ought to be often relieved, by occasionally adopting a horizontal position for a short time during the day. Constipation, or the lodgement of hardened feces in the rectum, prominently comes within this category ; but the measures used to remove this cause of congestion ought not to be such as to leave behind ~~the~~ operation an irritability equally as far removed from health as the congestion which they are designed to relieve. All drastic purgatives therefore, especially those containing aloes, should be prohibited, and the necessary soluble condition of the bowels secured, by attention to diet, the occasional use of tepid water injections or the mildest laxatives ; and the strength sustained by a judicious selection of tonics, and as generous a diet as the patient can assimilate. Dr. M'Kenzie (see London Lancet, vol. 1, 1856) presented a very valuable paper to the Medical Society of London on "the functional derangements of the liver as a cause of uterine disease," in which he showed from statistical data how frequently derangements of these organs coexist. It is worthy of remembrance in this connection that the favorite remedy of Sir Astley Cooper in many uterine maladies, especially in obstinate leucorrhœa, was the Hyd. S. Mur. However, there can be no

*Their*

question that a congestion of the portal circulation will greatly complicate and aggravate diseases of the uterus ; and, therefore, the conditions necessary for its free play ought to be steadily maintained. The same remark will apply to every other function of the body, and each ought to be individually investigated, and any errors observed, be corrected.

A persistence for two or three months in a treatment embracing the principles just adverted to, choosing such particular remedies to fulfil the required indications as each individual case may seem to demand, modifying the persistence or activity of the treatment conformably with the constitutional idiosyncrasies of the patient, all of which cannot be precisely defined, but must be left to the judgment and discrimination of the attending physician, will, in most cases, remove the malady. But should the symptoms attendant upon chronic leucorrhœa persist in despite of the treatment thus laid down, then a resort to stronger local applications may be proper, from the supposition that local abrasions may complicate the case.

Injections *per vaginam* of solutions of Sulph. Zinci., or decoctions of oak or Peruvian bark, daily used after the tepid water washings, or, a solution of Nit. Argent. of the strength of grs. vi to xii, to oz. j of distilled water, may be advantageously substituted once a week, as it is not the destruction, but the *antiphlogistic* or *vital modifying* effect of this agent, that is required in such cases, as has been so admirably described and enforced both by M. Andral and Prof. Meigs.

A great deference for the opinion of Prof. Meigs makes me unwilling to dissent from his views in regard to *this manner of application*, but frequent opportunities of observing its efficiency compels me to urge its adoption. The great objection against its use is, that, if used in sufficient strength to be actively remedial, the adjoining parts, not requiring its application, may suffer from its contact. As it is only used of strength sufficient to act as a *modifying* stimulant, and not as an escharotic, his objection does not apply. In chronic ulceration of the cornea, a stronger solution of nitrate of silver than is now recommended is often used, with marked benefit, without injuring the adjoin-



ing conjunctiva, and in ulceration of the throat, without provoking disease in the adjoining parts. Another objection is urged by Prof. Meigs; that injections *per vaginam* do not reach the os uteri, in consequence of the natural collapse of the walls of the vagina, and the misdirection of the syringe by the patient. Whatever will tend to obviate the latter part of this last objection, will prevent the first from acting as an obstruction. I have found no difficulty in giving such directions to my patients so that I have had no doubt, from the result of the application, as well as from their own sensations, that it reached the cervix; but, should it be necessary further to secure the application to the os, from a possible mistake, I would suggest the use of a syringe shaped like the "prolapsus and diseased uterus tube" of Dr. Whitehead, only having the cylinder of uniform size, so as to permit a piston to play within it, with effect, and the end to be introduced, slightly flattened and hollowed, so that the os uteri may be received into the depression thus made; the upper part of the end of the tube, including the depressed part, to be perforated with small holes so that the fluid used may escape, shower-like, from the instrument. The triangular wing on the side, intended to be held toward the pubis, will secure its introduction in the right direction. I append a drawing of this syringe, and its peculiarities will suggest for themselves its advantages without further explanation.\*

Should, however, every means now recommended be found to fail in removing the symptoms, indicating a diseased condition of the cervix uteri, then, but not till then, will it be justifiable to resort to what Prof. Meigs sententiously terms "*a flagrant operation*," in violation of that modesty which, in spite of all our philosophy, is, to a virtuous woman, as dear as her existence, and upon which most of the charms and amenities of social life depend.

Dr. Fitch, of Portland, Me., has kindly sent me the following, as a reply to my request, to be furnished with a written statement of a case I heard him relate before the late convention of the "Maine Medical Association:"

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\* See Frontispiece.

"The case to which you allude is only one of several with which I am acquainted, where I believe the speculum and caustic were unnecessarily if not injuriously used. The circumstances occurred about three years since, and, as near as I can recollect, are as follows: A young married woman, walking with her husband, met a physician, to whom she was, then and there, for the first time introduced. After a few minutes of general conversation, the physician, upon parting with them, called the husband aside and informed him that his wife was far from well, and that he was convinced she had ulceration of the os uteri. He was accordingly requested to call. At his first visit the patient was subjected to both speculum and caustic, which was frequently repeated during several weeks until at length she became unable to leave her bed. The cauterizations were then suspended, and the patient gradually and *gratefully* recovered her previous state of health.

"Quite recently, an instance of complete occlusion of the os uteri occurred in my practice, which I relieved by incision, giving exit to an accumulation of several months standing, with which the uterus was distended and which was unquestionably caused by the application of caustics within the os and cervix, nearly twelve months previous to my seeing the patient.

"You are quite welcome to adduce my name, if need be, as authority for the above cases."

A medical practitioner in my neighborhood, informs me that he was employed to continue the treatment of cauterization after it had been decided to be necessary, and had been commenced by a distant physician; and that he could not find, upon examination, any appearance of ulceration; and, unwilling to subject the parts to the violent effects of caustic, had, from a spirit of compromise with the *young lady's* wishes, arising from her fearful apprehensions, as well as the desire of her friends, substituted simple cold water for the strong solution of nitrate of silver recommended by her first medical adviser; and that her recovery toward health was much more rapid under the former application than the latter; the patient having had the benefit of general treatment during the continuance of both applications.

In regard to my own experience in this matter, I will briefly

state, that during the last eighteen years I have been in the habit of using the speculum as an aid in the diagnosis of uterine diseases, but, I confess, without finding that it afforded any preeminent assistance over tactile examination. I have often resorted to its use in cases which, from the symptoms they exhibited, I thought would be found to be superficial ulceration, but seldom have I observed such lesions existing. During the whole period that I have been in the habit of resorting to this instrument as an auxiliary in determining the existence of intra vaginal maladies, I have not found over twelve or fifteen cases of positively ascertained ulceration of the cervix uteri, and two of these at least, were undoubtedly of specific character.

I have had a number of patients who, having been examined by myself as carefully as I possibly could do it, in a variety of positions, as well as by different specula, and assured them to be free from disease of the womb, have nevertheless been pronounced by other practitioners, after a metoscopic examination by them, as being subjects of uterine disease; yet these patients, though repeatedly cauterized and encouraged by assurances of complete recovery, should they persist in the use of *such applications*, have, notwithstanding, remained as confirmed invalids as they were before being cauterized; and at least two of these cases underwent a very great aggravation of their symptoms during the time and after they had been thus treated.

From all that precedes we feel warranted in believing that the following propositions have been substantiated by the accumulated testimony of the most eminent medical practitioners in different parts of the world, and corroborated by legitimate deductions drawn from the application of well established principles in physiology and pathology to the phenomena connected with the disease in controversy :

1. That "ulceration" is a lesion presenting an excavation or solution of continuity, produced by a molecular death, the lifeless elements being absorbed back into the circulation through the action of the absorbents, and is generally the result of a constitutional cause; while abrasions and excoriations are produced either by mechanical or chemical agents; by the attrition of



foreign bodies or the escharotic effects of morbid secretions, usually the product of other parts and coming in contact with the ulcerated surface.

2. That while abrasions or <sup>or</sup> excoriation~~ations~~ are of frequent occurrence on the cervix uteri, especially in the pregnant female, ulceration rarely exists on that appendage, excepting from *mechanical* or *specific causes*; and that all of these lesions when not of a special character, are, of themselves of trivial importance, only demanding by their complication with other more important diseases, the serious attention of the medical practitioner.

3. That the premonstrative use of the speculum, or the direct application of caustics, are seldom justifiable or required in the diagnosis or treatment of diseases of the cervix uteri; for, that tactile demonstration is more to be relied upon than specular examination, and that the application of caustic agents for the cure of simple lesions ought never to be made *destructive*, but only to produce a modification of the molecular action of the parts diseased, and that this can be done by carefully using solutions of a strength sufficient to produce the latter effect on a denuded surface without the possibility of endangering the adjoining healthy parts whose epithelial covering has not been destroyed.

Finally; that as abrasions, excoriations and ulcerations of the cervix uteri, are, in a great majority of cases the results of constitutional disease, or functional derangement; therefore, the treatment of these lesions to be permanently successful must be principally directed to the general vitiation or the physiological disturbance; and that to pronounce the local affection a disease *per se* is to encourage a practice, which, while it does not remove the organic evil, subjects the patients to a greater injury by doing violence to their moral sensibilities.

DR. MC RUER'S UTERINE SYRINGE.

LARGEST SIZE.















